								Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2003								10788530					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL TYPE	ENTITY	OR		R THAN ENTITY	
TOTAL CLAIMS			67				1	RATE	FEE	٦ [¨]	RATE	FEE	
FOR			NUMBER FILED		NUM	NUMBER EXTRA		BASIC F		<u>, </u>	BASIC FEE	+	
TOTAL CHARGEABLE CLAIMS			62 m	67 minus 20=		47		XS 9=	-	OR	1	011	
INDEPENDENT CLAIMS			_s-i	ninus 3 =	2			X43=	+	-	V06	100	
М	JLTIPLE DEPE	NDENT CLAIM F	RESENT						+	HOR		The	
* If the difference in column 1 is less than zero, enter *0" in column 2							l	+145=		OR	L		
CLAIMS AS AMENDED - PART II 8-2-00							1	TOTAL	· L	JOR		1.788	
	(Column 1) (Column 2) (Column 3)							SMALI	ENTITY	OR	OTHER SMALL		
AMENDMĘNT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE]	RATE	ADDI- TIONAL FEE	
	Total	. 67	Minus	- 6	7	=		X\$ 9=		OR	X\$18=		
AME	Independent	FNTATION OF M	Minus	DENDENT				X43=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						ſ	+145=		OR	+290=		
·							L	TOTAL			TOTAL		
(Column 1) (Column 2) (Column 3)											ADDIT. FEE		
ENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT - EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	•	Minus	1.0		= ·		X\$ 9=		OR	X\$18=		
	Independent	•	Minus	***	21.4114		T	X43=		OR	X86=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=-		OR	+290=		
								TOTAL		OR	TOTAL LOOIT, FEE	•	
(Column 1) (Column 2) (Column 3)								OII. FEE	•	•	WUII. FEEL	·	
AMENUMENI C		CLAIMS REMAINING AFTER AMENDMENT	·	HIGHE NUMBI PREVIOL PAID FO	ER JSLY	PRESENT EXTRA	Γ	PATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	••		-	Γ	X\$ 9=		OR	X\$18=		
E L	Independent	•	Minus	***		#	H	X43=		. 1	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						\vdash			OR			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								145=		OR	+290=		
H	* If the "Highest Number Previously Pald For" IN THIS SPACE is less than 20, enter "20." "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										TOTAL ODIT. FEE		
T	he "Highest Num	ber Previously Paid	For (Total or	Independent	i) is the	highest number fo	ound	in the app	propriate box	in colu	mn 1.,		